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REMARKS/ARGUMENTS

The proposed amendment to the specification adds the discussion of the drawing that was requested by the Examiner. The listing of the claims includes all of the pending claims as amended. Applicants assume that this listing satisfies the Examiner's request for substitute claims.

Status of the Claims

Claims 1-3, 5-14, 16, and 17 are pending and under consideration.

Statement of the Rejections

Claims 1-3, 5-14, 16, and 17 stand rejected under 35 U.S.C. §102(b) as anticipated by McIlroy et al. The reference discloses a health care management system wherein the user inputs information related to the health condition of an individual and guideline treatment options. A guideline is described as a "disciplined framework or process to guide and assist the user . . . in identifying appropriate treatment" (col. 7, lines 45-53). According to the reference, the guideline is viewed as a decision tree with multiple data collection nodes and conditional branching (col. 5, lines 21-45). The "[D]iagnosis-based guidelines are structured to work with an interactive question and answer methodology that . . . guides the user through . . . process. This is done by presenting questions in a logically-structured order, leading to guideline treatment options" (col. 2, lines 66 to col. 3, line 4). The "data-collection queries are logically structured so that . . . user . . . is led to an endpoint that is usually one guideline option" or "alternative treatments . . . or a recommendation for further . . . evaluation . . ." (col. 5, lines 14-20).

For the reasons set forth in the Final rejection, the Examiner has taken the position that McIlroy et al. teach all of the elements of claims 1 and 12 and dependent claims 2-3, 5-11, 13, 14, 16, and 17. It is noted that the Examiner did not cite any disclosure of the use of commercial LOTUS NOTES and/or LOTUS DOMINO NOTES software as set forth in claim 11. McIlroy et al. disclose the use of Paradox as the data base software and the application software is written in Microsoft C language (col. 4, line 65 to col. 5, line 2). In fact , there is no disclosure of commercial LOTUS NOTES and/or LOTUS DOMINO NOTES software in the reference.

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Applicants' Traversal

Applicants traverse the rejections and respectfully request reconsideration in view of the following discussion.

Claims 1-3, 5-14, 16, and 17 are not anticipated by McIlroy et al. because the reference does not disclose all elements of the claims.

To Anticipate a Claim, the Reference Must Teach Every Element of the Claim

MPEP §2131 states the basic requirements for anticipation under 35 U.S.C. §102 citing relevant case law. As stated therein, “[T]he identical invention must be shown in *as complete detail* as is contained in the . . . claim.” (emphasis added).

McIlroy et al. does not anticipate independent claims 1 and 12 because the question/answer component is not “at least one recorded catalogue of recommended actions” comprised of “hierarchised sequences of alternative actions”.

Independent claims 1 and 12 recite “at least one recorded catalogue of recommended actions”. The Examiner has taken the position that McIlroy et al. disclose “at least one recorded catalogue of recommended actions” and cited certain portions of the reference. The section in col. 7, lines 45-53 is a general description of a guideline as a “disciplined framework or process to guide and assist the user . . . in identifying appropriate treatment”. Applicants submit that this general teaching is not sufficient disclosure of a *recorded catalogue of recommended actions* to support the rejection under 35 U.S.C. §102.

The disclosure at col. 7, line 54 to col. 8, line 22 generally describes the question/data collection phase. The other cited teaching at col. 2, line 59 to col. 3, line 3 refers to interactive question and answer methodology and “presenting questions in a logically-structured order, leading to guideline treatment options”. The Examiner is maintaining her position that the question/answer sequence corresponds to Applicants’ “recorded catalogue of recommended actions”.

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The sequence of entry phase, then question phase, followed by the identification of a treatment option or other action is *not* a recorded catalogue of recommended actions comprised of hierarchised sequences of alternative actions. The sequence itself is comprised of fixed phases. There is no alternative to entry phase, the question phase or the treatment option phase. The system of McIlroy et al. will always proceed through these phases even though there may be additional questions in the question phase or further review in the treatment option phase. These additional steps are extensions of, not alternatives to the required phases.

The entry phase collects information from the user. No recommended actions or alternative actions are present in this phase. Therefore, Applicants' claimed "catalogue of recommended actions comprised of of hierarchised sequences of alternative actions" is not readable on the entry phase of McIlroy et al.

The question/data collection phase does not involve any recommended actions or sequences of actions. Questions are presented to the user and data is collected from the user. Neither the questions nor the data is an action. Therefore, the question/answer sequence is neither a catalogue of recommended *actions*, nor a "hierarchised sequences of alternative *actions*". The user of the system of McIlroy et al. is first presented with a question which is not an action. Depending upon the answer, the user is then presented with a choice of guidelines or more questions neither of which are actions.

The sequence of selections or answers made by the user are created at the time of use and are not in any *recorded* catalogue prior to selection by the user. Therefore, the sequence of selections by the user in McIlroy et al. is not a disclosure of a *recorded* catalogue of recommended actions which is used to steer a process of interrelated actions. Any recordation of the sequence takes place *after* the selection and is not used thereafter to steer the process.

Applicants submit that the only catalogue of recommended actions in the method of McIlroy et al. is in the third phase shown in Fig. 7 as the list of treatment options.

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Applicants also note that the index component, question component, treatment component and clinical decision components are not recorded in a catalogue, i.e., they are recorded in separate databases. The question component is comprised of separate databases. The questions are in one "catalogue" (data base) (Fig. 4) and the answers are in separate data bases (Figs. 5-7). Therefore, the cited sections of the reference do not disclose a recorded catalogue of recommended actions comprised of hierarchised sequences of alternative actions.

The Examiner also relies on the teaching in col. 5, lines 21-45 that a guideline viewed as a decision tree with multiple data collection nodes and conditional branching. Again, this general teaching is not a disclosure of a recorded catalogue of recommended actions. The decision tree is a way of illustrating the logic used to arrive at the treatment options. The decision tree itself is *not* actually recorded in the system and is *not* a catalogue of recommended actions. Although each guideline has "a definite algorithmic structure", the algorithmic structure is not recorded as a catalogue of recommended actions. The algorithmic structure is inherent in the structure and relationship between the question and answer databases and is not recorded as a retrievable record. Moreover, the question and answer databases are *separate* databases and not a single catalogue. Taken separately or together, neither database is a "hierarchised sequence of alternative *actions*". As discussed previously, the questions and answers in Fig. 2, 4, 5, etc. are not actions.

Applicants submit that the only recorded catalogue of recommended actions disclosed in McIlroy et al. is the data base containing the treatment options (Fig. 7). However, as shown in Fig. 7, the treatment options are not listed as "hierarchised sequences of alternative actions". In fact, as discussed in detail in a later section, the treatment options are the "endpoints of navigation through the decision trees" and do not generate any further forms in the method of McIlroy et al. (col. 5, lines 24-26).

The method according to the invention *continues* to guide the user in through a process by generating hierarchically organized forms and subforms for each procedure step after presentation of the treatment options. For example, in a medical setting, the method can generate

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forms and subforms for additional procedures set by the guidelines. These additional procedures may include specific lab tests, x-rays, or other diagnostic procedures and scheduling the next visit for follow up (page 15, lines 14-20 of the published application).

McIlroy et al. do not disclose evaluation forms that are hierarchically organized as forms and subforms.

Applicants note that it is known in the art that the term "subform" means a form that can be embedded within other forms. When a subform is changed, all of the form containing that subform automatically reflect the changes. The difference between a subform and a regular form is that a subform can be inserted into other forms. The subform will behave and appear to the end user as if it were an integral part of the form. In the method according to the invention, a subform can be integrated into several forms (page 6, lines 11-13 of the published application).

The Examiner's position that Figs. 10 and 11 show the generation of a subform is incorrect. McIlroy et al. does not disclose any subforms. The Figs. 10 and 11 do not show any subforms, i.e., there are no other forms embedded in Figs. 10 and 11. The Examiner's apparent definition of a subform as a form coming from the selection of a previous form is not the known and accepted meaning of the term "subform" in database technology. Fig. 11 is *not* a subform of Fig. 10. As noted previously, a subform is a form that can be embedded in another form. Figs. 11 is not embedded and cannot be embedded in Fig. 10 since Fig. 11 requires a selection in Fig. 10 and then is viewed separately *after* Fig. 10.

McIlroy et al. do not disclose the generation of evaluation forms for each sequential procedure step.

As discussed previously, the entry phase and questions phase do not involve recommended or alternative actions, only data collection and presentation. The forms generated during these phases do *not* correspond to the forms and subforms generated in the claimed method. The treatment option phase of McIlroy et al. presents alternative actions but does not generate any forms for each sequential steps of a treatment option. For example, in Fig. 16,

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treatment 2B includes two procedural steps. The method of McIlroy et al. does not generate any evaluation form for these procedural steps. The method according to the invention could generate a form to actually order and schedule the treatment with streptokinase or urokinase and a form to order and schedule treatment with heparin for 6 days after the initial 3 day treatment.

McIlroy et al. do not disclose the generation of evaluation forms in function of the hierarchised sequences of alternative actions.

For the reasons discussed previously, Applicants submit that neither the entry phase and question phase of McIlroy et al. correspond to a sequence of alternative actions. Neither phase is comprised of sequences of alternative actions. The only sequences of alternative actions are the treatment options. The treatment options are the endpoints of the process of McIlroy et al. (col. 5, lines 24-26). Figs. 10-11 are generated by the user's answers to questions, not by any procedure steps of the treatment options. Therefore, the reference does not teach the generation of evaluation forms in function of the treatment options.

McIlroy et al. do not disclose the generation of evaluation forms in function of the past history of actions.

The Examiner has taken the position that generation of evaluation forms in function of the past history of actions is disclosed in col. 6, line 64 to col. 7, line 6 which describes Fig. 6 "in which the answer to a preceding question together with the answer to the current question defines the next step". As discussed previously, the question component is comprised of questions and answers which are not actions. Therefore, the question component is not a recorded catalogue of recommended actions or a hierarchised sequence of alternative actions. According to Applicants' claims, the generation of the evaluation forms is carried out in function of 1) the hierarchised sequences of alternative actions of the recorded catalogue actions *and* 2) the past history of actions. Since the cited disclosure does not disclose 1), Applicants submit that the cited disclosure does not support a rejection under 35 U.S.C. §102 for this aspect of the claimed method.

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McIlroy et al. do not disclose the transfer of a group of evaluation forms and subforms in one operation into one file.

The Examiner has taken the position that "McIlroy discloses that the transferring of a group of the evaluation forms and sub-forms using one operation into one file takes place" in col. 18, line 59 to col. 19, line 8. The cited section describes Fig. 29 which is an example of report sorted by guideline, proposed treatment and final recommendation. The report shows shows number of cases under each category, percent specialist review, percent with extensions, etc. The Examiner contends that an "aggregate of the recommendation treatments are disclosed. This operation would be analogous to aggregating the information taken from the forms and sub-forms since the information taken from the forms and sub-forms are evaluated and lead to recommendation treatments".

As recognized by the Examiner, it is the information (data) from the forms that appears in the report of Fig. 29. The claims recite a group of evaluation forms and subforms are transferred in one operation into one file. The Examiner does not contend that the forms themselves are transferred into one file. Applicants submit that information or data is not the same as the forms and subforms of Applicants' claimed invention. Even if one assumes that Figs. 10-17 are evaluation forms, there is nothing in McIlroy that teaches or suggests transferring the forms shown in Figs. 10-17 into one file in one operation. There is no disclosure of any transfer of these forms at all. Therefore, the cited section of McIlroy et al. does not support the rejection under 35 U.S.C. §102 for this aspect of the claimed method.

Moreover, it is again noted that McIlroy et al. do not teach or suggest subforms (forms embedded in other forms). Since subforms are not disclosed, their transfer into one file is certainly not disclosed.

McIlroy et al. do not disclose electronic selection algorithms in respect of the hierarchised sequences of alternative actions.

Claim 2 relates to a method according to claim 1, wherein said at least one recorded catalogue of recommended actions comprises associated electronic selection algorithms in

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respect of the hierarchised sequences of alternative actions. The Examiner cites the disclosure at col. 3, line 2-4 to support the rejection under 35 U.S.C. §102. The cited section of the reference states that the interactive question and answer methodology “guides the user through the complex medical evaluation process. . . . by presenting questions in a logically-structured order, leading to guideline treatment option(s)”.

Applicants submit that the “logically-structured order” used in McIlroy et al. are not part of any catalogue of recommended actions. As discussed previously, questions are not actions so the catalogues (list) of questions in Figs. 4-6 are not catalogues of recommended actions. There are no algorithms in the lists shown in Figs. 4-6. The logical order of the questions and answers are the result of the design and the relationship between the lists of questions and answers.

McIlroy et al. do not disclose electronic selection algorithms in respect of the hierarchised sequences of alternative actions.

Claim 3 is directed to another embodiment which is a method according to claim 2, wherein said selection algorithms are integrated in said generated electronic forms. The Examiner cites Figs. 10-17 as disclosing selection algorithms integrated in electronic forms. The Examiner did not provide any explanation how these figures show selection algorithms integrated in electronic forms.

Applicants submit that Figs. 10-17 do not disclose any algorithms integrated in the forms shown in these figures. The “logically-structured order” of McIlroy et al. is in the design of the database (col. 6, lines 56-63), not in the forms of Figs. 10-17. There is no support in McIlroy et al. for the Examiner’s position that this aspect of the claimed invention is anticipated by the reference.

McIlroy et al. do not disclose or suggest the use of Lotus Notes or Lotus Domino Notes software.

Claim 11 is directed to a method according to claim 1, wherein the steering software is an application embodiment of commercial LOTUS NOTES and/or LOTUS DOMINO NOTES

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software. McIlroy et al. do not teach or suggest the use of Lotus Notes or Lotus Domino Notes as either the database management software or the application software. Therefore, Applicants submit that the rejection of claim 11 under 35 U.S.C. §102 must be withdrawn.

The reference specifically teaches the use of Paradox as the data management software (col. 4, lines 65-66). There is no teaching that another data base management software product would be suitable. There is nothing in the reference that would motivate one to use Lotus Notes or Lotus Domino Notes as the data management software.

Moreover, even if Lotus Notes or Lotus Domino Notes were used as the data base management software in McIlroy et al., the resulting method would not be the same as the claimed method for the reasons discussed previously.

The remaining dependent claims are not anticipated by McIlroy et al. since the independent claims are not anticipated by the reference.

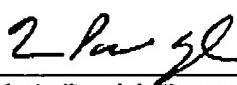
Applicants have previously presented the detailed reasons why McIlroy et al. do not anticipate independent claims 1 and 12 and dependent claims 2 and 3. Therefore, the remaining claims which depend on claims 1 and 12 are not anticipated by McIlroy et al.

Applicants submit that a review of the prior art of record as a whole shows that the claims in the present application meet the requirements for patentability. It is respectfully requested that the Examiner reconsider her rejections of the claims and allow claims 1-3, 5-14, 16, and 17.

Respectfully submitted,

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